PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Docket Number

10/538957

| CLAIMS AS FILED - PART I | | | | | | | | SMALL ENTITY TYPE | | OR | OTHER THAN | | | |
|--|--|----------------------------------|--|--------------------------------|--|--------------------------|----|---------------------|------------------------|----|----------------------------|----------|---------------------|--|
| _ | NATIONAL | OTAGE PEEG | (Cotumi | n 1) | (Column 2) | | | D | | 1 | | _ | | |
| U.S | , NATIONAL | STAGE FEES | • | | | | | RATE | FEE | | RATE | <u> </u> | FEE | |
| BASIC FEE | | | SMALL ENT. | | LARGE ENT. = \$ 300 | | | BASIC FEE | | OR | BASIC FEE | 3 | 9 | |
| EXAMINATION FEE | | | Satisfies PCT A (4) = \$50 | /\$ 100 | All other situations = \$ 100 / \$ 200 | | | EXAM. FEE | | | EXAM. FEE | Œ | D | |
| SEARCH FEE | | | U.S. is ISA = \$ ALL other cou \$ 200 / \$ | intries = | All other situations = \$ 250 / \$ 500 | | | SEARCH FEE | | | SEARCH FEE | 4 | 65 | |
| FEE FOR EXTRA SPEC. PGS. | | | minu | us 100 = | / 50 ≎ | | | X \$ 125 = | | | X \$ 250 = | | | |
| TOTAL CHARGEABLE CLAIMS | | | ∞ mir | nus 20 = | ٠ | | | X \$ 25 = | | OR | X \$ 50 = | | | |
| INDEPENDENT CLAIMS | | | a m | inus 3 = | • | | | X \$ 100 = | | OR | X \$ 200 = | | | |
| MUL | TIPLE DEPEN | DENT CLAIM PRI | ESENT | | | | | + \$ 180 = | | OR | + \$ 360 = | | | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | | • | TOTAL | | OR | TOTAL | | | |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) | | | | | | | | SMALL ENTITY | | | OTHER THAN SMALL ENTITY | | | |
| AMENDMENTA | 4/14/15 | CLAIMS REMAINING AFTER AMENDMENT | 1 | HIGH NUM PREVK PAID | BER DUSLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | TK | DDI- DNAL EEE | |
| | Total | . 90 | Minus ' | • J | 0 | = <i>f</i> | | X \$ 25 = | | OR | X \$ 50 = | | 1 | |
| | Independent | · 1 | Minus | *** | 3 | = <i>U</i> | | X \$ 100 = | | OR | X \$ 200 = | | \setminus | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | + \$ 180 = | | OR | + \$ 360 = | / | | |
| | | | | • | TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | | | | | | |
| (Column 1) (Column 2) (Column 3) | | | | | | | | | | | | | | |
| AMENDMENT B | | CLAIMS REMAINING AFTER AMENDMENT | | HIGH NUMI PREVIO PAID | EST BER OUSLY | (Column 3) PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | TIC | DDI- DNAL EE | |
| | Total | • | Minus | ** | | 2 | I | X \$ 25 = | | OR | X \$ 50 = | | | |
| | Independent | • | Minus | *** | | | | X \$ 100 = | | OR | X \$ 200 = | | | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | +\$ 180 = | | OR | + \$ 360 = | | | |
| | | | | | | | - | TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | | | |
| * | * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" In THIS SPACE is less than "20", enter "20". | | | | | | | | | | | | | |